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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. Terry M. Crellin 204 W. 330 North Laverkin, UT 84745 M. CRELLIN (Depositor's name (Signature (Date APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/589,386 06/07/2007 James K. Garland **TEAR AWAY WALL** 7139 TITLE OF INVENTION: DENTAL MODEL TRAY AND ASSOCIATED ARTICULATOR PUBLICATION FEE DUE PREV. PAID ISSUE FEE DATE DUE APPLN. TYPE SMALL ENTITY ISSUE FEE DUE TOTAL FEE(S) DUE YES nonprovisional \$755 \$300 12/15/2011 11/89/2011 HVUONG2 8888889 10589386 **EXAMINER** ART UNIT **CLASS-SUBCLASS** 61 10:1566 755.00 OP NELSON, MATTHEW M 433-060000 東汽油時 360.80 OP 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list TERRY M. CRELLIN (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): 🗖 Individual 🗖 Corporation or other private group entity 🗖 Government 4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Issue Fee A check is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any Advance Order - # of Copies overpayment, to Deposit Account Number (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

Registration No. 25579 M. CRELLIN Typed or printed name

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